

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Optometric Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Charles K Atwell

Mailing Address 238 Chasse Cir

City

St Charles

State

IL

Zip Code

60174-1418

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Doctor of Optometry

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 21 / 2015

Transaction ID : 38666874

Amount of Each Receipt this Period

420.00

Full Name (Last, First, Middle Initial)

B. Dr. Derek J Louie

Mailing Address 19302 Riverwood Lane

City

Lake Oswego

State

OR

Zip Code

97035-1318

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Doctor of Optometry

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.68

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 21 / 2015

Transaction ID : 38666875

Amount of Each Receipt this Period

131.67

Full Name (Last, First, Middle Initial)

C. Dr. Randolph E Brooks

Mailing Address 3 Schindler Dr

City

Succasunna

State

NJ

Zip Code

07876-1183

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Doctor of Optometry

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 21 / 2015

Transaction ID : 38666876

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

373.67